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## STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

TITLE OF NEWSPAPER BRYANT DAKOTAN		<sup>2. DATE</sup> 09-28-2022	
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH 50	ED ANNUALLY 3B. ANNUAL SUBSCRIPTION PRICE \$ 42		
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)			
(Not printers) PUBUA 121, BRYANI, SU 31221			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)  PUBLISHER (Not printers)  PUBLISHER (Not printers)			
6. FULL NAME OF PUBLISHER: SIEPHANIE SAUDEK			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding I percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.  FULL NAME  COMPLETE MAILING ADDRESS  STEPHANIE SAUDER  PO BOX 94 BRYANT SD 57221			
<ol> <li>KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.</li> </ol>			
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDIN MONTHS	NG 12 NEADEST	L NO. COPIES ISSUED TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	469		480
B.PAID AND/OR REQUESTED CIRCULATION     Sales through dealers and carriers, street vendors, and counter sales.	46	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	50
2. Mail Subscription (Paid and or requested)	363	Note - 1980	368
3. Paid Electronic Copies	15		20
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	424		438
D.FREE DISTRIBUTION  1. BY MAIL, CARRIER OR OTHER MEANS	10		10
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10		10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	444		458
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing	15		12
2. Return from News Agents	10	111	10
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	469		480
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public  I swear that the statements made by me are true, correct, and complete:  Light and Suidely  Light 10			
(Signature) (Title)			
State of South Dakota ) Sworn to before me this 29 day of September 30			
County of Hundin ) & KRISTIE CIVIAL & Notary Public			
(Seal)  KRISTIE SIKKINK  Notary Public  2/9/2 3			